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Get the Nose You Were Born to Have

Most people who consult plastic surgeons simply do not like their noses. When they see Dr. Richard Westreich, a board-certified facial cosmetic and reconstructive surgeon, they won't get a snow job but an education on what really goes into realizing their goal of a better nose.

When patients bring in pictures of other people's noses, Dr. Westreich has to explain that everybody's underlying anatomy is different. "We have to arrive at a realistic expectation," he says, "because if you overdo it, the result will look unnatural." Michael Jackson is the perfect example of what can happen if you ignore a patient's underlying anatomy and try to achieve too much.

Critical factors

What you start with, in many ways, determines what can be achieved. Skin thickness, cartilage strength, the size of the nose and ethnicity are critical factors. Fortunately, the computer imaging techniques at Dr. Westreich's disposal can help a patient reach a reasonable expectation based on their own anatomy.

Rhinoplasty involves resculpting the underlying elements of the nose, while maintaining a natural appearance. "My No. 1 consideration is functional," he says. "Is there a problem with the ability to breathe? I take a lot of time determining the functional aspect of the procedure."

With his intricate knowledge of nasal airway mechanics, Dr. Westreich believes that creating a uniform and

straight nose, both internally and externally, is the best way to meet functional and esthetic goals.

Two approaches

Rhinoplasty is performed through either an "open" or "closed" approach. Both surgical techniques can achieve similar esthetic results. The difference lies in whether any incision is made in the skin of the nose. Dr. Westreich is trained in both techniques but prefers closed rhinoplasty (also known as endonasal), which he uses in over 90% of his cases.

"From a patient's perspective," he says, "I prefer no external incision because it translates into a more natural appearance." The open procedure often involves more reconfiguration using grafts. Grafts increase the risk of immediate and long-term complications

Since rhinoplasty is about creating facial balance and harmony, chin augmentation or reduction may be considered at the time of rhinoplasty surgery. Dr. Westreich can explain these different techniques, as well as their potential benefits and pitfalls.

Dr. Westreich also performs brow lifts, resurfacing peels and facial liposuction, among other procedures. In addition to his practice, he serves as associate director, Facial Plastic Surgery Division, at Long Island College Hospital, and is assistant professor in the Department of Otolaryngology at SUNY-Downstate Medical Center.

For more information, call (718) 222-0035 (Brooklyn Heights) or (212) 861-4100 (Upper East Side). Visit online at www.newyorknose.com.



Dr. Westreich is a board-certified facial cosmetic and reconstructive surgeon.

Plastic surgery-speak

- Rhinoplasty is the resculpting of the underlying elements of the nose, while maintaining an unoperated appearance.
- Septoplasty is the operation to correct the nasal septum, a midline structure made up of cartilage near the tip of the nose and the bone farther back. The nasal septum is essentially the foundation of the entire nose, separating the right and left sides of the nose and helping to regulate nasal airflow.
- Rhytidectomy is face-lifting done to remove excess skin while tightening the underlying supporting structures (muscles and connective tissue).
- Blepharoplasty is eye rejuvenation surgery, usually of the upper eyelid.